

Attorney Docket No.: P-1925-US

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below under my name.

I believe that I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

METHOD OF FACE INDEXING FOR EFFICIENT BROWSING AND SEARCHING OF PEOPLE IN VIDEO

the Specification of which

☐
☒

is attached hereto
 was filed on **September 8, 1999**
 as United States Application Number or PCT International
 Application No. **PCT/IL99/00487**
 and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified Specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any provisional application filed in the United States in accordance with 35 U.S.C. §1.119(e), or any application for patent that has been converted to a Provisional Application within one (1) year of its filing date, or any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

PRIOR FILED APPLICATION(S)

<u>APPLICATION NUMBER</u>	<u>COUNTRY</u>	<u>(DAY/MONTH/YEAR FILED)</u>	<u>PRIORITY CLAIMED</u>
PCT/IL99/00487	PCT	8 SEPTEMBER 1999	
60/099,702	US	10 SEPTEMBER 1998	

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application listed below, and, insofar as the subject matter of each of the claims of this application is not disclosed in any prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material

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information as defined in Title 37, Code of Federal Regulations, §1.56(a), which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

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PCT/IL99/00487	8 SEPTEMBER 1999	PENDING
60/099,702	10 SEPTEMBER 1998	EXPIRED

I hereby appoint as my attorney(s) and agent(s) Heidi M. Brun (Agent, Registration No. 35,104), or Daniel J. Swirsky (Agent, Registration No. 45,148) or Mark S. Cohen (Attorney, Registration No. 42,425) or Rochel L. Abboudi (Agent, Registration No. 44,490) or Suzanne Erez (Agent, Registration No. 46,688) or Vladimir Sherman (Attorney, Registration No. 43,116) or David Klein (Agent, Registration No. 41,118) said attorney(s) and agent(s) with full power of substitution and revocation to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Please address all correspondence regarding this application to:

EITAN, PEARL, LATZER, & COHEN-ZEDEK
ONE CRYSTAL PARK, SUITE 210
2011 CRYSTAL DRIVE
ARLINGTON, VA 22202-3709

Direct all telephone calls to (703) 486-0600 and all facsimiles at (703) 486-0800.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF INVENTOR: WILF, Itzhak

FULL RESIDENCE ADDRESS: 5 Sapir Street, Neve Monoson 60190, Israel

COUNTRY OF CITIZENSHIP: Israel

FULL POST OFFICE ADDRESS: same

SIGNATURE OF INVENTOR _____

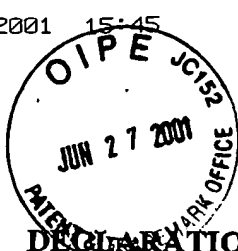
DATE _____

Attorney Docket No.: P-1925-US

FULL NAME OF INVENTOR: **CASPI, Yaron**FULL RESIDENCE ADDRESS: **49 Ha'Irusim Street, Ness Ziona 70400, Israel**COUNTRY OF CITIZENSHIP: **Israel**FULL POST OFFICE ADDRESS: **same**

SIGNATURE OF INVENTOR _____

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FULL NAME OF INVENTOR: WILF, Itzhak

FULL RESIDENCE ADDRESS: 5 Sapir Street, Neve Monoson 60190, Israel

COUNTRY OF CITIZENSHIP: Israel

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FO/2290-59398760

Attorney Docket No.: P-1925-U ;

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FULL NAME OF INVENTOR: WILF, Itzhak
FULL RESIDENCE ADDRESS: 5 Sapir Street, Neve Monoson 60190, Israel ILX
COUNTRY OF CITIZENSHIP: Israel
FULL POST OFFICE ADDRESS: same

SIGNATURE OF INVENTOR

DATE 7 March, 2001

1-00 062704 59333760

Attorney Docket No.: P-1925-U1

200 FULL NAME OF INVENTOR: GREENSPAN, HayitFULL RESIDENCE ADDRESS: 136 Shikun Banim, Kfar Bilu 79695, Israel ILXCOUNTRY OF CITIZENSHIP: IsraelFULL POST OFFICE ADDRESS: sameSIGNATURE OF INVENTOR Katy GreenspanDATE 10/3/2001FULL NAME OF INVENTOR: PIKAZ, ArieFULL RESIDENCE ADDRESS: 2 Halamed-He Street, Givatayim 53403, IsraelCOUNTRY OF CITIZENSHIP: IsraelFULL POST OFFICE ADDRESS: same

SIGNATURE OF INVENTOR _____

DATE _____

FULL NAME OF INVENTOR: MENADEVA, OvadyaFULL RESIDENCE ADDRESS: 10 Harav Levi Street, Bat Yam 59647, IsraelCOUNTRY OF CITIZENSHIP: IsraelFULL POST OFFICE ADDRESS: same

SIGNATURE OF INVENTOR _____

DATE _____

Attorney Docket No.: P-1925-U

FULL NAME OF INVENTOR: GREENSPAN, Hayit
FULL RESIDENCE ADDRESS: 136 Shikun Banim, Kfar Bilu 79695, Israel
COUNTRY OF CITIZENSHIP: Israel
FULL POST OFFICE ADDRESS: same

SIGNATURE OF INVENTOR _____

DATE _____

3-00 FULL NAME OF INVENTOR: PIKAZ, Arie
FULL RESIDENCE ADDRESS: 2 Halamed-He Street, Givatayim 53403, Israel ILX
COUNTRY OF CITIZENSHIP: Israel
FULL POST OFFICE ADDRESS: same

SIGNATURE OF INVENTOR _____

DATE 7 March, 2001

FULL NAME OF INVENTOR: MENADEVA, Ovadya
FULL RESIDENCE ADDRESS: 10 Harav Levi Street, Bat Yam 59647, Israel
COUNTRY OF CITIZENSHIP: Israel
FULL POST OFFICE ADDRESS: same

SIGNATURE OF INVENTOR _____

DATE _____

Attorney Docket No.: P-1925-17S

FULL NAME OF INVENTOR: GREENSPAN, Hayit

FULL RESIDENCE ADDRESS: 136 Shikun Bazim, Kfar Bilu 79695, Israel

COUNTRY OF CITIZENSHIP: Israel

FULL POST OFFICE ADDRESS: same

SIGNATURE OF INVENTOR _____

DATE _____

FULL NAME OF INVENTOR: PIKAZ, Aris

FULL RESIDENCE ADDRESS: 2 Halamed-He Street, Givatayim 53403, Israel

COUNTRY OF CITIZENSHIP: Israel

FULL POST OFFICE ADDRESS: same

SIGNATURE OF INVENTOR _____

DATE _____

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FULL RESIDENCE ADDRESS: 10 Harav Levi Street, Bat Yam 59647, Israel

COUNTRY OF CITIZENSHIP: Israel

FULL POST OFFICE ADDRESS: same

SIGNATURE OF INVENTOR _____

DATE

20 May, 2001

Attorney Docket No.: P-1925-U

5-00 FULL NAME OF INVENTOR: CASPI, Yaron

FULL RESIDENCE ADDRESS: 49 Ha'Irusim Street, Ness Ziona 70400, Israel ILX

COUNTRY OF CITIZENSHIP: Israel

FULL POST OFFICE ADDRESS: same

SIGNATURE OF INVENTOR _____

DATE 27 March, 2001

FOI 290-59898460